24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
	C 000344707
Check if 24-hour report 48-hour report New report Amends report filed	on 10 02 7 2015
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign Solutions	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 117 N. St. Asaph St	Amount
City State Zip Code	743.01
Alexandria VA 22314	Transaction ID : SE24.1036 Date of Disbursement or Obligation
Purpose of Expenditure October Monthly List Rental Fees Category/ Type	10 01 7 2015
Name of Federal Candidate Support Office	Sought: House District:
Hillary Clinton Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Campaign Solutions	10 01 2015
Mailing Address 117 N. St. Asaph St	
	Amount
City State Zip Code	4488.31
Alexandria VA 22314	Transaction ID : SE24.1037 Date of Disbursement or Obligation
Purpose of Expenditure October Monthly External Deployment Costs Category/ Type	10 01 2015
Name of Federal Candidate Support Office	e Sought: House District:
Hillary Clinton Oppose	President Senate State:
	ursement For: Primary X General
Per Election for Office Sought 317737.90 2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5231.32
(b) SUBTOTAL of Unitemized Independent Expenditures	1 4 1 4 1 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Dan Backer [Electronically Filed] Date 0	2 20 2016
Signature	

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: SE

Transaction ID : SE24.1036

This report amended to update final disbursement amounts.

Form/Schedule: Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
	O status
Check if 24-hour report 48-hour report New report Amends	report filed on 10 02 2015
Full Name of Payee Campaign Solutions	Date of Public Distribution/Dissemination
	10 01 Y Y Y Y Y
Mailing Address 117 N. St. Asaph St	Amount
City State Zip Code	0.00
Alexandria VA 22314	Transaction ID : SE24.1038 Date of Disbursement or Obligation
Purpose of Expenditure October Monthly Facebook Advertising Category/ Type	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Suppo	ort Office Sought: House District:
Hillary Clinton Oppor	se President Senate State:
Calendar Year-To-Date Per Election for Office Sought 317737.90	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
CD, Inc.	10 01 Y Y Y Y Y Y
Mailing Address 117 N. St. Asaph St	Amount
City State Zip Code	8806.68
Alexandria VA 22314	Transaction ID : SE24.1039 Date of Disbursement or Obligation
Purpose of Expenditure October Monthly List Rental Fees and Online Advertising Category/ Type	10 / D D / Y Y Y Y Y
Name of Federal Candidate Supp	ort Office Sought: House District:
Hillary Clinton Oppo	se President Senate State:
Calendar Year-To-Date Per Election for Office Sought 317737.90	Disbursement For: Primary X General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	8806.68
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	······· ·
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or ag party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Dan Backer [Electronically Filed]	Date 02 20 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Stop Hillary PAC	C C00544767		
Check if 24-hour report X 48-hour report New report X Amends report	rt filed on 10 02 2015		
Full Name of Payee	Date of Public Distribution/Dissemination		
American Action News	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 203 South Union Street Suite 300	Amount		
City State Zip Code	1715.80		
Alexandria VA 22314	Transaction ID : SE24.1040 Date of Disbursement or Obligation		
Purpose of Expenditure October Monthly Online Advertising Fees Category/ Type	10 01 7 2015		
Name of Federal Candidate Support	Office Sought: House District:		
Hillary Clinton Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought 317737.90	Disbursement For: Primary General 2016 Other (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
Political List Brokers	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 107 S. West St	Amount		
City State Zip Code	0.00		
Alexandria VA 22314	Transaction ID : SE24.1041 Date of Disbursement or Obligation		
Purpose of Expenditure October Monthly List Rental Fees Category/ Type	10 D D D Z 2015		
Name of Federal Candidate Support	Office Sought: House District:		
Hillary Clinton Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought 317737.90	Disbursement For: Primary General 2016 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	1715.80		
(a) SOBTOTAL OF REINIZED INDEPENDENT EXPENDITURES	1713.00		
(b) SUBTOTAL of Unitemized Independent Expenditures	•		
(c) TOTAL Independent Expenditures	>		
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.			
Dan Backer [Electronically Filed] Date	02		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LXI LIND	TOTILO		PAGE 5 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC				C C00544767
Check if 24-hour report X 48-hour report	New repo	ort X Amends repo	rt filed on	10 02 / 2015
Full Name of Payee			Date	of Public Distribution/Dissemination
MDS Communications Corporation				10 01 2015
Mailing Address 545 West Juanita Ave			Amou	nt
Ste 900	Ctoto	Zin Codo		0.00
Mesa	State Zip Code AZ 85210			action ID : SE24.1042
Purpose of Expenditure October Monthly List Rental Fees		Category/ Type		of Disbursement or Obligation
Name of Federal Candidate		Support	Office Sough	t: House District:
Hillary Clinton		X Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	3	17737.90	Disbursemer 2016	tt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Campaign Solutions				10 01 2015
Mailing Address 117 N. St. Asaph St			Amou	int
City	State	Zip Code	$ \Gamma$	8598.00
Alexandria	VA	22314		action ID : SE24.1037_B of Disbursement or Obligation
Purpose of Expenditure Bumper Stickers		Category/ Type		10 01 2015
Name of Federal Candidate		Support	Office Sough	nt: House District:
Hillary Clinton		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	, , ,	317737.90	Disbursemer 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	S		· []	8598.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		· ·	
(c) TOTAL Independent Expenditures			· -	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	e or authorized			
Dan Backer Signature	[Electron	ically Filed] Date	02	20 2016
Olgitature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 6 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Stop Hillary PAC	C C00544767		
Check if 24-hour report X 48-hour report New report X Amends report filed	I on 10 02 2015		
Full Name of Payee Media Bridge LLC	Date of Public Distribution/Dissemination		
Mailing Address 9064 Courthouse Road	10 01 2015 Amount		
City State Zip Code	438.75		
Spotsylvania VA 22553	Transaction ID : SE24.1036_B Date of Disbursement or Obligation		
Purpose of Expenditure October Monthly List Rental Fees Category/ Type	10 01 / 2015		
Name of Federal Candidate Support Office	e Sought: House District:		
Hillany Clinton	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought Disbrace 2016	ursement For: Primary		
Full Name of Payee	Date of Public Distribution/Dissemination		
The Rainmakers	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 5211 Port Royal Road	Amount		
Suite 500			
City State Zip Code Springfield VA 22151	2620.20 Transaction ID : SE24.1036_B_B Date of Disbursement or Obligation		
Purpose of Expenditure October Monthly Outbound Calling Costs Category/ Type	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate Support Offic	e Sought: House District:		
Hillary Clinton Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For:		
(a) SUBTOTAL of Itemized Independent Expenditures	3058.95		
(b) SUBTOTAL of Unitemized Independent Expenditures			
	1 4 1 4 1 6		
(c) TOTAL Independent Expenditures	27410.75		
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
[Electronically Filed] Date	02 20 2016		
Signature			